

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

101817023  
590-804

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	27.
FOR	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	27 minus 20 = 7
INDEPENDENT CLAIMS	5 minus 3 = 2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE
Total	7	Minus	27	-	XS 9-	
Independent	1	Minus	15	-	XS18-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	FEES
BASIC FEE	385.00
OR	BASIC FEE 770.00
XS 9-	
OR	XS18- 126
X43-	
OR	X86- 172
+145-	
OR	+290-
TOTAL	1068
OR	TOTAL 1068

BEST AVAILABLE COPY

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE
Total	7	Minus	27	-	XS 9-	
Independent	1	Minus	15	-	XS18-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
XS 9-	
OR	XS18-
X43-	
OR	X86-
+145-	
OR	+290-
TOTAL ADDT. FEE	TOTAL ADDT. FEE
OR	TOTAL ADDT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE
Total	7	Minus	27	-	XS 9-	
Independent	1	Minus	15	-	XS18-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
XS 9-	
OR	XS18-
X43-	
OR	X86-
+145-	
OR	+290-
TOTAL ADDT. FEE	TOTAL ADDT. FEE
OR	TOTAL ADDT. FEE

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 2.